Mental Illness In Geriatric Prison Population Judith H. W. Crossett, MD PhD Clinical Professor of Psychiatry; Director, Geriatric Psychiatry Fellowship University of Iowa Hospitals 9/28/11

- Mental illness, including substance abuse, is common in the older prison population.
 Depression is most common, up to 30%
 Risks are poor self-perceived health, prior depression—not length of sentence Alcohol abuse rates are very high; most have no prior substance treatment
- 2. Most mental illness in the prison population is undetected and untreated. ½ with bipolar illness or schizophrenia have no medication Only 12% with depression are getting treatment. The rates of treated non-mental illness are much higher. Suicide rates are higher in prison; suicide is the leading cause of death. After release, rates of referral are low; mortality in first two weeks is high.
- 3. Mental illness in older adults causes

 More hours of care in nursing homes

 More days in bed

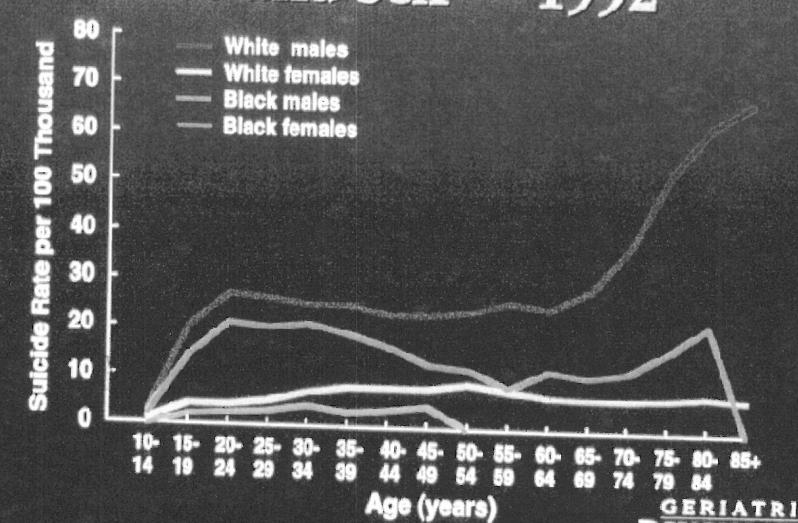
 More medical costs, visits, prescriptions

 Reduced productivity

Recommendations:

- A. Mental illness in prison populations should be detected (screening) and treated
- B. Treatment should based in the public health system in collaboration with the correctional system
- C. Discharge planning and aftercare needs to be part of the standard of care.

Rate of Suicide by Age, Race and Sex — 1992



National Center for Health Statistics.

PSYCHIATRY ALLIANCE